DECLARATION FOR "371" APPLICATION Page 1 of 3

THEN OR DESIGN PATENT

• • • • • • • • •	RATION FOR UTILITY O		PU4963USw_
APPLICATION WITH	First Names Inventor: YOUNGMAN		
. .			Complete if known:
			App No.:
() Declaration submitted with initia	I filing or		
() Declaration submitted after initia	al filing (surcharge required 37CFR1.16(e))		Filing Date
			Group Art Unit:
As below name	d inventor. I hereby declare that:		<u> </u>
My residence, post office	e address and citizenship are as stated be	low next to my name.	
	al, first and sole inventor (if only one nand below) of the subject matter which is classically and the subjec	aimed and for which a patent is so	
	INDANE COMPOUNDS AS	CCR5 ANTAGONISTS	
the specification of whic	h (check only one item below):		
[]is attached hereto. OR			
	as United States application S	erial No or PCT	International
	CT/US03/39975 filed Dec. 12, 2003 and f applicable)	I was amended on (MM/DD/YYY	Ύ)
	e reviewed and understand the contents of adment specifically referred to above.	the above-identified specification	1, including the claims,
I acknowledge the duty t	to disclose information which is material	to patentability as defined in 37 C	CFR §1.56.
inventor's certificate or 365(a) of States of America, listed below ar certificate or of any PCT internati	nefits under 35 U.S.C. §119 (a)-(d) or §3 any PCT international application which nd have also identified below, by checking ional application having a filing date before PRIORITY CLAIMS UNDER 35 U.S.	designated at least one country or g the box, any foreign application ore that of the application on which	ther than the United not for patent or inventor's
Prior Foreign Application	Country	Foreign Filing Date	PRIORITY
Number (s)		(MM/DD/YYYY))	CLAIMED
<u>. </u>			•
	1		
ļ.			
5.			
hereby claim the benefit under T	Title 35, United States Code §119(e) of a		ication(s) listed below:
Application No.		te (MM/DD/YYYY)	
1. 60/433,378		12/13/2002	
2.			
			<u> </u>

DECLARATION FOR "371" APPLICATION Page 2 of 3

COMBINED DECLARATION FOR UTILITY or DESIGN	
PATENT APPLICATION WITH POWER OF ATTORNEY Con	tinued

POST OFFICE ADDRESS

87 Hulme Court, Apt. 2C

POST OFFICE

ADDRESS

ATTORNEY'S DOCKET NUMBER PU4963USw

STATE & ZIP CODE/COUNTRY

California 94305, US

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States

		or PCT International is material to patenta	application in the manner provided by the first ability as defined in 37 C.F.R. §1.56 which because date of this application:	paragraph of 35 U.S.C. §112, I ackno	wledge the duty to disclo	se information which	
 	PRIOR	U.S. PARENT A	APPLICATION or PCT PARENT A	PPLICATION			
ŀ					STATUS (Check o	one)	
U.S. Parent Application or PCT Parent Number						ABANDONED	
					 		
	POWER OF ATTORNEY: As a named inventor, I hereby appoint the practitioners associated with the Customer Numbers provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith Customer Number 23347 and Customer Number 20462						
ŀ		s all correspondence	Direct Telephone Cal	ls to:			
	Addiess	David J. Levy Corporate Intellecto GlaxoSmithKline Five Moore Drive, I Research Triangle I	Bonnie L. Deppenbrock 919-483-1577				
	are belie made ar	y declare that all st eved to be true; an re punishable by fi	tatements made herein of my own knownd further that these statements were mine or imprisonment, or both, under 18 tion or any patent issuing thereon.	ade with the knowledge that with U.S.C. 1001, and that such wil	llful false statements	s and the like so may jeopardize	
	M.	FULL NAME	FAMILY NAME YOUNGMAN	FIRST GIVEN NAME Michael	SECOND GIVEN NAME/	INITIAL	
1	, J	OF INVENTOR INVENTOR'S SIGNATURE	Significant Goog		Date: 2/16/2004		
	0	RESIDENCE & CITIZENSHIP	Durham NC	STATE OR FOREIGN COUNTRY NC	COUNTRY OF CITIZENS US		
	. 1	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, PO Box 13398	CITY Research Triangle Park	North Carolina	27709, US	
	7D.	FULL NAME	FAMILY NAME KAZMIERSKI	first given name Wigslaw	SECOND GIVEN NAME/ Mieczyslaw	INITIAL	
a	0-2	OF INVENTOR— INVENTOR'S SIGNATURE	Signature		Date: 2-16-2004		
	0	RESIDENCE & CITIZENSHIP	CITY Durham	STATE OR FOREIGN COUNTRY NC	COUNTRY OF CITIZENS US		
	2	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, PO Box 13398	Research Triangle Park	North Carolina	27709, US	
		FULL NAME	FAMILY NAME YANG	FIRST GIVEN NAME Hanbiao	SECOND GIVEN NAME/	INITIAL	
	2	OF INVENTOR INVENTOR'S	Y AING Signature	Manual	Date:		
	0	SIGNATURE RESIDENCE &	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENS	SHIP	
١	1 1	CITIZENSHIP	Standord	CA	CN		

CITY

Stanford

DECLARATION FOR "371" APPLICATION Page 2 of 2

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

PU4963USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.P.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT International filing date of this application:

U.S. Parent Application or PCT Parent Number					TUS (Check	one)
		PCT Parent Parent Paling D (MM/DD/YYY			BNDING	ABANDONED
rosecut	e this application an	As a named inventor, I hereby appoint the dot transact all business in the Patent and d Customer Number 20462	e practitioners associated w Trademark Office connecte	ith the Custon d therewith	mer Numbers	provided below to
	all corresponden David J. Levy Corporate Intellect GlaxoSmithKline Five Moore Drive,	ce and telephone calls to Customer No wal Property	ımber <u>23347</u>	Dire		alls to: . Deppenbrock .483-1577
re beli nade ai	y declare that all so eved to be true; ar re punishable by fi	tatements made herein of my own knownd further that these statements were mine or imprisonment, or both, under 18 tion or any patent issuing thereon.	ade with the knowledge to U.S.C. 1001, and that su	hat willful fa ch willful fa	alse statemer Ise statemen	nts and the like so its may jeopardize
	FULL NAME	YOUNGMAN	FIRST GIVEN NAME Michael	SEC	ond given ham	EVINITIAL
2	OF INVENTOR'S SIGNATURE	Signature	The state of the s	Date		· · · · · · · · · · · · · · · · · · ·
0	RESIDENCE & CITIZENSHIP	city Durham	STATE OF PORBIGN COUNTRY NC	US		
1	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline Five Moore Drive, P() Box 13398	сту Research Tria ngle P a	rk No		a 27709, US
2	FULL NAME OF INVENTOR	FAMILY NAME KAZMIERSKI	vinst given name Wieslaw	0	OND GIVEN NAM eczyslaw	BINITIAL
0	INVENTOR'S SIGNATURE RESIDENCE &	Signature	STATE OR FOREIGN COUNTRY		NTRY OF CITIZE	KNSHIP
2	POST OFFICE ADDRESS	Durham POST OFFICE ADDRESS GlaxoSmithKline	NC cmv Research Triangle Pa	STA	TE & ZIP CODE/C	country a 27709, US
2	FULL NAME OF INVENTOR	Five Moore Drive, PO Box 13398 FAMILY NAME YANG	rikst given name Hanbino	8EC	ond given NAM	IRINITIAL
D	INVENTOR'S SIGNATURE	Signature Pany Panh		Date	4/16	12004
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DECLARATION FOR "371" APPLICATION Page 3 of 3

		the state of the s		
2	FULL NAME OF INVENTOR	AQUINO	FIRST GIVEN NAME Christophor	second given name/initial Joseph
	INVENTOR'S SIGNATURE	Signature / signature	ho hair	Date: 2.16.2004
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